٠.	PATENT	APPLICATI Effec	ON FEE I	RD		Application or Docket Number 10/184763							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			7					RATE FEE		7	RATE	FEE	ł
FOR			NUMBER FILED		NUM	NUMBER EXTRA		ASIC FE	E 385.00	ÖR	· · ·		1
TOTAL CHARGEABLE CLAIMS			- minus 20=		. 01		I	XS 9=		OR			1
INDEPENDENT CLAIMS			2 _ minus 3 ±		50	50		X43=		1	You		
м	ULTIPLE DEPE	NDENT CLAIM F	PRESENT							OR		344	1
•	f the difference	e in column 1 is	less than zero, enter "0" in column 2				. F	+145= TOTAL	 	OR	+290=		ļ
CLAIMS AS AMENDED - PART II										OR	TOTAL	1/14	þ
0	2/2/04	(Column 1)	MENDED - PART II (Column 2) (Column 3)			SMALL E		ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER KUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 7	Minus	- 20)	= \		X\$ 9=		OR	X\$18=		
	Independent	• 7	Minus	· 1	/	=		 X43=	 	OR	X86=		l
Ļ	FIRST PRESENTATION OF MULTIPLE DEPEN			PENDENT	T CLAIM			4.45	 	1	200		
φ	13) 17/13/	16, 17 ₎ 18						145=	ļ	OR	+290= TOTAL		ŀ
	(Column 1) (Column 2) (Column 3)								L	OR	ADDIT. FEE		l
AMENDMENT B	-	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA	[RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• .	Minus	••		= .	,	(\$ 9=		OR	X\$18=		
	Independent		Minus			-	7	(43= ·	·	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145-			+290=		
										OR	TOTAL	•	
							ADD	IT. FEE		OR ,	VOOT. FEEL		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							<i>.</i>					
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOL PAID FI	JSLY	PRESENT EXTRA	R	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	•
	Total	•	Minus	49		±	X	s 9-		OR	X\$18=		
	Independent	*	Minus	***		•	×	43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
	the "Highest Nur the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	id For IN THIS Id For IN THIS	S SPACE is I S SPACE is I	ess than	20, enter "20."	ADD	TOTAL IT: FEE			TOTAL DOIT. FEEL mn 1.		